



AIR NIUGINI SAVINGS & LOAN SOCIETY LTD

Your Key for a Better Future

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TERM DEPOSIT APPLICATION FORM

INVESTORS DETAILS

Date: _____

Full Name: _____ Membership No.: _____

Company: _____ Staff No.: _____

Department: _____ Business Phone: _____

Mobile: _____ Email: _____

INVESTMENT DETAILS

Type of Deposite Account: 13 (3 Months) 16 (6 Months)

Amount in words: _____

Amount in figures: _____

FOR OFFICE USE ONLY

Deposit Date: _____ Maturity Date: _____

PAYMENT INSTRUCTIONS

Interest Payment - Payment Action

1. Transfer Internal: _____

2. Cheque to Self: _____

3. Re-invest: _____

Maturity Renewal - Renewal Action

1. Transfer Internal: _____

2. Cheque to Self: _____

3. Re-invest: _____

SIGNATURE OF APPLICANT

FOR OFFICE USE ONLY

Prepared by: _____

Checked by: _____

Authorised by: _____

Date Posted: _____